

Crosswalk Management System

Report	REPORT CROSSWALK TO STATE
Filename	acrobat distiller
Run by	OPS\$PCUMMING
Report Date	03-FEB-05 02:51

Crosswalk Report

Status : FN Substance Abuse and Mental Health Services Administration
Media ID : MHDDSDADMS Office of Applied Studie
Start Date : 01-JAN-91
End Date :
Follow-up :

Oregon's Treatment Episode Data Set
Version : 1

K = Key Field

		System			<u>Oregon</u>
Item		Item	Value		State System Data
No.	Treatment Episode Data Set				
1	System Transaction Type	-	Transaction Type Added to Each Record		
K 2	State Code	OR	FIPS Code Added to Each Record		
3	Reporting Date	-	Month and Year of Submission Added to Each Record		

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No.	Treatment Episode Data Set	Item	Value	State System Data
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K 1	Provider Identifier	03,04	Clinic Identification
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K 2	Client Identifier (Admission)	-	-
No longer effective as of: 06-30-2001			

K 2	Client Identifier (Admission)	-	Mental Health Information System Number - System Generated
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K 3	Co-Dependent/Collateral	-	Co-Dependent/Collateral Data Not Collected
	2 No		2 No

K 4	Client Transaction Type	15	Referral Source
	A Initial Admission		A Initial Admission
	T Transfer/Change in Service		T Transfer (System generated)

K 5	Date of Admission	05	Opening Date
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6	Number of Prior Treatment Episodes	-	-
	0 0		0 0
	1 1		1 1
	2 2		2 2
	3 3		3 3
	4 4		4 4
	5 Or More		5 5 or more

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Item	Item		
No.	Treatment Episode Data Set	Value	State System Data

7	Principal Source of Referral	15	Referral
01	Individual (includes self-referral))	00	None
06	Other Community Referral	04	MR-DD Agency
04	School (Educational)	05	School
06	Other Community Referral	06	Other Community Agencies
06	Other Community Referral	07	Adult and Family Services (Welfare)
06	Other Community Referral	08	Children's Services Division
06	Other Community Referral	09	Employment Division
06	Other Community Referral	10	Health Division
06	Other Community Referral	11	Vocational Rehabilitation Division
06	Other Community Referral	12	Motor Vehicles Division
03	Other Health Care Provider	13	Mental Health Agency
07	Court/Criminal Justice/DUI/DWI	21	Court or Evaluator
07	Court/Criminal Justice/DUI/DWI	22	Jail - City or County
07	Court/Criminal Justice/DUI/DWI	23	Parole - Includes Juveniles
07	Court/Criminal Justice/DUI/DWI	24	Police or Sheriff - Local, State
07	Court/Criminal Justice/DUI/DWI	25	Psychiatric Security Review Board (PSRB)
07	Court/Criminal Justice/DUI/DWI	26	Probation - Includes Juveniles
07	Court/Criminal Justice/DUI/DWI	27	Treatment Alternatives to Street Crimes (TASC)
03	Other Health Care Provider	31	Private Health Professional
01	Individual (includes self-referral))	32	Self
01	Individual (includes self-referral))	33	Family/Friend
05	Employer/EAP	34	Employer/EAP
06	Other Community Referral	35	Senior and Disabled Services Division
02	Alcohol/Drug Abuse Provider	40	Outpatient
02	Alcohol/Drug Abuse Provider	41	Residential Care
02	Alcohol/Drug Abuse Provider	42	Non Hospital Detox
02	Alcohol/Drug Abuse Provider	43	Hospital Detox
02	Alcohol/Drug Abuse Provider	44	Private Hospital Alcohol/dRUG Care
02	Alcohol/Drug Abuse Provider	45	Community Intensive Residential Treatment (CIRT)
06	Other Community Referral	47	Self Help Groups (AA, NA, Etc)
02	Alcohol/Drug Abuse Provider	50	Drug Outpatient

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7	Principal Source of Referral	15	Referral
02	Alcohol/Drug Abuse Provider	51	Drug Residential
02	Alcohol/Drug Abuse Provider	52	Methadone Maintenance or MethadoneDetox
02	Alcohol/Drug Abuse Provider	53	Hospital Drug Detox
06	Other Community Referral	68	EPSDT/Medichex
06	Other Community Referral	69	Social Security Administration
06	Other Community Referral	70	Jobs Program (AFS)
07	Court/Criminal Justice/DUI/DWI	71	State Correctional Institution
07	Court/Criminal Justice/DUI/DWI	72	Federal Correctional Institution
02	Alcohol/Drug Abuse Provider	73	Correction's A&D Treatment Program
03	Other Health Care Provider	74	State Hospital or Training Center
02	Alcohol/Drug Abuse Provider	75	Non-Hospital Drug Detox
02	Alcohol/Drug Abuse Provider	76	Private Hospital Drug Care
02	Alcohol/Drug Abuse Provider	77	Prevention/Early Intervention
97	Unknown	99	Other
No longer effective as of: 06-30-2001			

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Item		Item	Value	State System Data
No.	Treatment Episode Data Set			
7	Principal Source of Referral	15	Referral	
01	Individual (includes self-referral))	00	None	
06	Other Community Referral	04	Developmental Disabilities	
04	School (Educational)	05	School	
06	Other Community Referral	06	Other Community Agencies	
06	Other Community Referral	07	Adult and Family Services (Welfare)	
06	Other Community Referral	08	Services to Children and Families	
06	Other Community Referral	09	Employment Division	
03	Other Health Care Provider	10	Health Division	
06	Other Community Referral	11	Vocational Rehabilitation Division	
06	Other Community Referral	12	Motor Vehicles Division	
06	Other Community Referral	13	Mental Health Agency	
07	Court/Criminal Justice/DUI/DWI	21	Court or Evaluator	
07	Court/Criminal Justice/DUI/DWI	22	Jail - City or County	
07	Court/Criminal Justice/DUI/DWI	23	Parole - Includes Juveniles	
07	Court/Criminal Justice/DUI/DWI	24	Police or Sheriff - Local, State	
07	Court/Criminal Justice/DUI/DWI	25	Psychiatric Security Review Board (PSRB)	
07	Court/Criminal Justice/DUI/DWI	26	Probation - Includes Juveniles	
03	Other Health Care Provider	31	Private Health Professional	
01	Individual (includes self-referral))	32	Self	
01	Individual (includes self-referral))	33	Family/Friend	
05	Employer/EAP	34	Employer/EAP	
06	Other Community Referral	35	Senior and Disabled Services Division	
02	Alcohol/Drug Abuse Provider	40	Outpatient	
02	Alcohol/Drug Abuse Provider	41	Residential Care	
02	Alcohol/Drug Abuse Provider	42	Non Hospital Detox	
02	Alcohol/Drug Abuse Provider	43	Hospital Detox	
02	Alcohol/Drug Abuse Provider	44	Private Hospital Alcohol/dRUG Care	
06	Other Community Referral	47	Self Help Groups (AA, NA, Etc)	
02	Alcohol/Drug Abuse Provider	52	Methadone Maintenance or MethadoneDetox	
06	Other Community Referral	68	EPSDT/Medicheck	
06	Other Community Referral	69	Social Security Administration	

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Item	Item	Value	State System Data
No.	Treatment Episode Data Set		
7	Principal Source of Referral	15	Referral
06	Other Community Referral	70	Jobs Program (AFS)
07	Court/Criminal Justice/DUI/DWI	71	State Correctional Institution
07	Court/Criminal Justice/DUI/DWI	72	Federal Correctional Institution
02	Alcohol/Drug Abuse Provider	73	Correction's A&D Treatment Program
03	Other Health Care Provider	74	State Hospital or Training Center
02	Alcohol/Drug Abuse Provider	77	Prevention/Early Intervention
07	Court/Criminal Justice/DUI/DWI	78	Drug Court
03	Other Health Care Provider	80	Oregon Health Plan
06	Other Community Referral	81	Oregon Partnership Helpline
97	Unknown	99	Other

8	Date of Birth	08	Date of Birth
9	Sex	12	Sex
7	Unknown	-	Blank
2	Female	F	Female
1	Male	M	Male

10	Race	19	Race/Ethnicity
97	Unknown	-	Blank
05	White	01	White (Non Hispanic)
04	Black or African American	02	Black (Non Hispanic)
02	American Indian (Other than Alaskan Native)	03	Native American
01	Alaska Native (Aleut, Eskimo, Indian)	04	Alaskan Native
03	Asian or Pacific Islander	05	Asian
03	Asian or Pacific Islander	10	Southeast Asian
20	Other	11	Other Race
13	Asian		

No longer effective as of: 06-30-2001

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State System Data

10 Race

05 White
04 Black or African American
02 American Indian (Other than
Alaskan Native)
01 Alaska Native (Aleut, Eskimo,
Indian)
13 Asian
03 Asian or Pacific Islander
20 Other
23 Native Hawaiians or Other Pacific
Islanders

19 Race/Ethnicity

01 White (Non Hispanic)
02 Black (Non Hispanic)
03 Native American
04 Alaskan Native
05 Asian
10 Southeast Asian
11 Other Race
12 Native Hawaiian/Other Pacific Islander

11 Ethnicity

97 Unknown
05 Not of Hispanic Origin
05 Not of Hispanic Origin
05 Not of Hispanic Origin
05 Not of Hispanic Origin
05 Not of Hispanic Origin
02 Mexican
01 Puerto Rican
03 Cuban
04 Other Specific Hispanic
05 Not of Hispanic Origin

19 Race/Ethnicity

- Blank
01 White (Non Hispanic)
02 Black (Non Hispanic)
03 American Indian
04 Alaskan Native
05 Asian
06 Hispanic (Mexican)
07 Hispanic (Puerto Rican)
08 Hispanic (Cuban)
09 Other Hispanic
11 Other Race

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Item No.	Treatment Episode Data Set	Item	Value	State System Data
11	Ethnicity	19	Race/Ethnicity	
97	Unknown	-	Blank	
05	Not of Hispanic Origin	01	White (Non Hispanic)	
05	Not of Hispanic Origin	02	Black (Non Hispanic)	
05	Not of Hispanic Origin	03	American Indian	
05	Not of Hispanic Origin	04	Alaskan Native	
05	Not of Hispanic Origin	05	Asian	
02	Mexican	06	Hispanic (Mexican)	
01	Puerto Rican	07	Hispanic (Puerto Rican)	
03	Cuban	08	Hispanic (Cuban)	
04	Other Specific Hispanic	09	Other Hispanic	
05	Not of Hispanic Origin	11	Other Race	
05	Not of Hispanic Origin	12	Native Hawaiian/Other Pacific Islander	
12	Education	13	Education (Highest Grade Completed)	
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	00-25	00-25	
00	Less Than One Grade Completed	00-25	00-25	
13	Employment Status	25	Employment Status	
97	Unknown	-	Blank	
01	Full Time	1	Full Time (35 hours or more)	
02	Part Time	2	Part Time (17-34 hours)	
02	Part Time	3	Irregular (less than 17 hours)	
03	Unemployed	4	Not Employed (has sought employment)	
04	Not in Labor Force	5	Not Employed (has not sought employment)	

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14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiar-14C)	36	Drug Type, Primary, Secondary, Tertiary
10	Methamphetamine	-	Not Collected
01	None	00	None
05	Heroin	01	Heroin
06	Non-Prescription Methadone	02	Non-prescription Methadone
07	Other Opiates and Synthetics	03	Other Opiates and Synthetics
02	Alcohol	04	Alcohol
15	Barbiturates	05	Barbiturates
16	Other Sedatives or Hypnotics	06	Other Sedatives or Hypnotics
11	Other Amphetamines	07	Amphetamines/Methamphetamines
03	Cocaine, Crack	08	Cocaine
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preparations)	09	Marijuana/Hashish
09	Other Hallucinogens	10	Hallucinogens
17	Inhalants	11	Inhalants
18	Over-the-Counter	12	Over the Counter
14	Other Tranquilizers	13	Tranquilizers
20	Other	14	Other Drugs
08	PCP	21	PCP/PCP Combination
20	Other	23	Nicotin

15	Usual Route of Administration (Primary-15A, Secondary-15B, Tertiar-15C)	39	Most Recent Ususal Route of Administration
97	Unknown	-	Blank
01	Oral	1	Oral
02	Smoking	2	Smoking
03	Inhalation	3	Inhalation
04	Injection (IV or intramuscular)	4	Intramuscular Injection
04	Injection (IV or intramuscular)	5	Intravenous Injection
20	Other	6	Other

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Item		Item	
No.	Treatment Episode Data Set	Value	State System Data
16	Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C)	28	Frequency of Use or Degree of Impairment
97	Unknown	-	Blank
01	No past month use	0	None
02	1-3 times in past month	1	Less than once per week
03	1-2 times per week	2	Once per week
04	3-6 times per week	3	Several times per week
05	Daily	4	Once Daily
05	Daily	5	Two to three times daily
05	Daily	6	More than three times daily
17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	40	Age at First Use
00-95	Indicates The Age at First Use	00-96	00-96

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State System Data

K 18	Type of Services	35,3&4	Admission Modality,Clinic Identification
05	Long-term, (more than 30 days)	(3&4) SLIAG Residential Alcohol 161	
05	Long-term, (more than 30 days)	(3&4) SLIAG Residential Drug 162	
07	Non-Intensive Outpatient	(3&4) DUII-SLIAG Diversion II 168	
07	Non-Intensive Outpatient	(3&4) DUII-SLIAG Conviction II 178	
05	Long-term, (more than 30 days)	(3&4) Corrections - Alcohol 261	
05	Long-term, (more than 30 days)	(3&4) Corrections - Drug 262	
07	Non-Intensive Outpatient	(3&4) Outpatient - Alcohol (corrections) 264	
05	Long-term, (more than 30 days)	(3&4) Corrections - CIRT 271	
05	Long-term, (more than 30 days)	(3&4) Rehab - Alcohol 61	
05	Long-term, (more than 30 days)	(3&4) Rehab - Drug 62	
02	Free-standing Residential (Detox, 24 hour Service)	(3&4) Detox - Alcohol 63	
07	Non-Intensive Outpatient	(3&4) Outpatient - Alcohol 64	
07	Non-Intensive Outpatient	(3&4) Outpatient - Drug 65	
07	Non-Intensive Outpatient	(3&4) DUII-I Diversion 67	
07	Non-Intensive Outpatient	(3&4) DUII-II Diversion 68	
07	Non-Intensive Outpatient	(3&4) Outpatient - Methadone Maintenance 69	
05	Long-term, (more than 30 days)	(3&4) Intensive Residential (CIRT) 71	
02	Free-standing Residential (Detox, 24 hour Service)	(3&4) Acupuncture Detox 72	
02	Free-standing Residential (Detox, 24 hour Service)	(3&4) Detox - Drug 73	
07	Non-Intensive Outpatient	(3&4) DUII-I Conviction	

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State System Data

K 18	Type of Services	35,3&4	Admission Modality,Clinic Identification
07	Non-Intensive Outpatient	(3&4) DUII-II Conviction 78	
06	Intensive Outpatient	(3&4) Intensive Alcohol Outpatient 84	
06	Intensive Outpatient	(3&4) Intensive Drug Outpatient 85	
07	Non-Intensive Outpatient	(3&4) Marijuana Diversion-I 87	
07	Non-Intensive Outpatient	(3&4) Marijuana Diversion-II 88	
08	Ambulatory Detoxification	(3&4) Outpatient Methadone Detox 99	
01	Hospital Inpatient (Detox, 24 hour Service)	(35)06 Hospital Detox	
03	Hospital (other than detox)	- -	
No longer effective as of: 06-30-2001			

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Item No.	Treatment Episode Data Set	Item Value	State System Data
K 18	Type of Services	35,3&4	Admission Modality,Clinic Identification
05	Long-term, (more than 30 days)	(3&4) Rehab - Alcohol 61	
05	Long-term, (more than 30 days)	(3&4) Rehab - Drug 62	
02	Free-standing Residential (Detox, 24 hour Service)	(3&4) Detox - Alcohol 63	
07	Non-Intensive Outpatient	(3&4) Outpatient - Alcohol 64	
07	Non-Intensive Outpatient	(3&4) Outpatient - Drug 65	
07	Non-Intensive Outpatient	(3&4) DUII-II Diversion 68	
07	Non-Intensive Outpatient	(3&4) Outpatient - Methadone Maintenance 69	
02	Free-standing Residential (Detox, 24 hour Service)	(3&4) Detox - Drug 73	
07	Non-Intensive Outpatient	(3&4) DUII-I Conviction 77	
07	Non-Intensive Outpatient	(3&4) DUII-II Conviction 78	
07	Non-Intensive Outpatient	(3&4) Marijuana Diversion-I 87	
07	Non-Intensive Outpatient	(3&4) Marijuana Diversion-II 88	
08	Ambulatory Detoxification	(3&4) Outpatient Methadone Detox 99	
19	Opioid Replacement Therapy (Planned or Actual)WasUse of Methadone Planned/Actual	34	Methadone Prescribed
7	Unknown	-	Blank
2	No	00	No
1	Yes	01	Yes

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Item No.	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	9998	Not Collected	
2	Detail Drug Code, Secondary	9998	Not Collected	
3	Detail Drug Code, Tertiary	9998	Not Collected	
4	DSM Diagnosis	9998	Not Collected	
	999.98 Not Collected		999.98 Not Collected	
5	Psychiatric Problem in Addition to Alcohol or Drug Problem	9998	Not Collected	
	8 Uncollected		999.98 Not Collected	
6	Pregnant at Time of Admission	10	Eligibility Codes	
	2 No		- Absence of code 49	
	1 Yes		49 Pregnant at Admission	
No longer effective as of: 06-30-2001				
6	Pregnant at Time of Admission	106	Prenatal	
	1 Yes		1 Yes	
	2 No		2 No	
	6 Not Applicable		3 Not Applicable	
7	Veteran Status	9998	Not Collected	
	8 Not Collected		999.98 Not Collected	

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8	Living Arrangements	22	Living Arrangements
03	Independent Living	01	Alone
03	Independent Living	02	Spouse
02	Dependent Living	03	Parents, Relatives, Adult Children Homes
02	Dependent Living	04	Foster Parents
02	Dependent Living	05	Institution/Group Home
03	Independent Living	06	Friends or Others
03	Independent Living	22	Spouse or Significant Other & children
03	Independent Living	23	Spouse or Significant Other's Home
03	Independent Living	24	Children Under Age 18
01	Homeless	97	Homeless/Shelter
97	Unknown	98	Refused/Unknown

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8	Living Arrangements	22	Living Arrangements
03	Independent Living	01	Lives in Own Home
02	Dependent Living	03	Parents, Relatives, Adult Children Homes
02	Dependent Living	04	Foster Parents
02	Dependent Living	05	Institution/Group Home
03	Independent Living	06	Friends or Others
03	Independent Living	23	Spouse or Significant Other's Home
01	Homeless	97	Homeless/Shelter
97	Unknown	98	Refused/Unknown

9	Source of Income/Support	9998	Not Collected
98	Not Collected	999.9	Not Collected
		8	

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Item No.	Treatment Episode Data Set	Item	Value	State System Data
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9	Source of Income/Support	24	Source of Household Income
01	Wages/Salary	1	Wages, Salary
02	Public Assistance	1	Public Assistance/Welfare
03	Retirement/Pension	1	Pension/Unemployment/Veteran's Disability Benefits
03	Retirement/Pension	1	Social Security
04	Disability	1	SSI -- Federal
04	Disability	1	OSIP -- State
20	Other	1	Dividends/Interest
20	Other	1	Alimony/Child Support
21	None	1	None
20	Other	1	Other

10	Health Insurance	20	Health Insurance
01	Private Insurance (other than BCBS or HMO)	-	Other Private
02	Blue Cross/Blue Shield	-	Blue Cross/Blue Shield
03	Medicare	-	Medicare
04	Medicaid	-	Medicaid
06	Health Maintenance Organization (HMO)	-	Not Collected
20	Other (e.g. TriCare, Champus)	-	CHAMPUS, VA, Other Public
21	None	-	Blank

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10	Health Insurance	20	Health Insurance
01	Private Insurance (other than BCBS or HMO)	1	Private
02	Blue Cross/Blue Shield	1	Private
03	Medicare	1	Medicare
04	Medicaid	1	Medicaid
20	Other (e.g. TriCare, Champus)	1	V.A. Veterans' Administration
20	Other (e.g. TriCare, Champus)	1	Other Public
21	None	1	None
20	Other (e.g. TriCare, Champus)	1	Oregon Health Plan

11	Expected/Actual Primary Source of Payment	9998	Not Collected
98	Not Collected	999.98	Not Collected

12	Detailed Not in Labor Force	33	Employability Factor
02	Student	1	Student
01	Homemaker	2	Homemaker
03	Retired	3	Retired
04	Disabled	4	Unable for Physical or Psychological Reasons
05	Inmate of Institution (Prison or Institution - keeps people out of work force)	5	Incarcerated
06	Other	6	Seasonal Worker
06	Other	7	Temporary Layoff

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Optional

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13 Detailed Criminal Justice Referral Categories

15 Enrollment Referral Code

97	Unknown	-	Blank
01	State/Federal Court	21	Court or Evaluator
02	Other Court (Not State or Federal)	22	Jail - City or County
03	Probation/Parole	23	Parole - Includes Juveniles
02	Other Court (Not State or Federal)	24	Police/Sheriff - Local, State
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board	25	Psychiatric Security Review Board
03	Probation/Parole	26	Probation - Includes Juveniles
05	Diversionary Program (E.G. TASC)	27	Treatment Alternatives to Street Crimes
06	Prison	71	State Correctional Institution
06	Prison	72	Federal Correctional Institution
06	Prison	73	Corrections A&D Program

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13 Detailed Criminal Justice Referral Categories

15 Referral

02	Other Court (Not State or Federal)	21	Court or Evaluator
02	Other Court (Not State or Federal)	22	Jail - City or County
03	Probation/Parole	23	Parole - Includes Juveniles
02	Other Court (Not State or Federal)	24	Police or Sheriff - Local, State
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board	25	Psychiatric Security Review Board (PSRB)
03	Probation/Parole	26	Probation - Includes Juveniles
06	Prison	71	State Correctional Institution
06	Prison	72	Federal Correctional Institution
06	Prison	73	Correction's A&D Treatment Program
02	Other Court (Not State or	78	Drug Court

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14	Marital Status	21	Current Marital Status
97	Unknown	-	Blank
01	Never Married	1	Never Married
02	Now Married or Cohabiting	2	Married
05	Widowed	3	Widowed
04	Divorced	4	Divorced
03	Separated (legally or otherwise absent)	5	Separated
02	Now Married or Cohabiting	6	Living as Married

15	Days Waiting to Enter Treatment	9998	Not Collected
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Discharge

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Item

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104 Provider ID (At Discharge)**03,04****Clinic Identification****105 Client Identifier - (At Discharge)****-****Mental Health Information System Number
- System Generated****106 Co-Dependent/Collateral At
Discharge****-****Co-Dependent/Collateral Data Not
Collected****109 Service at Discharge****35,3&
4****Admission Modality,Clinic Identification**

05 Long-Term, >30 days

(3&4) Rehab - Alcohol
61

05 Long-Term, >30 days

(3&4) Rehab - Drug
62

02 Free-Standing Residential

(3&4) Detox - Alcohol
63

07 Outpatient

(3&4) Outpatient - Alcohol
64

07 Outpatient

(3&4) Outpatient - Drug
65

07 Outpatient

(3&4) DUII-II Diversion
68

07 Outpatient

(3&4) Outpatient - Methadone Maintenance
69

02 Free-Standing Residential

(3&4) Detox - Drug
73

07 Outpatient

(3&4) DUII-II Conviction
78

07 Outpatient

(3&4) Marijuana Diversion-I
87

07 Outpatient

(3&4) Marijuana Diversion-II
88

08 Detoxification

(3&4) Outpatient Methadone Detox
99**146 Date of Last Contact****49****Last Treatment Contact**

Oregon's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge

Oregon

Item

Item

No. Treatment Episode Data Set

Value

State System Data

147 Date of Discharge**49****Last Treatment Contact****149 Reason for Discharge , Transfer or
Discontinuance of Treatment****48****Termination Type**

07 Other

01 Initial Appointment(s) not kept with 14
days of enrollment02 Left Against Professional Advice
(Drop Out)02 Client termination without clinic
agreement (ie client leaves w/o
explanation)

01 Treatment Complete

03 Treatment complete

04 Transferred to Another Substance
Abuse Treatment Program or
Facility04 further treatment not appropriate for
client at this facility or in this service02 Left Against Professional Advice
(Drop Out)05 Non- Compliance with rules and
regualtions

07 Other

07 Client moved out of catchment area

07 Other

08 Client cannot get to facility for further
service/treatment

07 Other

09 Client cannot come for
service/treatment during facility hours

05 Incarcerated

11 Client incarcerated

06 Death

12 Client deceased

07 Other

13 Parents/legal guardian withdrew client

07 Other

14 Terimted due to program cut/reduction

08 Unknown

15 Administrative Termination - Facility
closed - client status unknown

07 Other

16 Termination due to Physical or Mental
illness

Crosswalk Management System

REPORT CROSSWALK TO STATE

End of Report